

Application Data Sheet**Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?	No
Sequence submission?::	No
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	Wheat Variety 25R35
Attorney Docket Number::	1654
Request for Early Publication?::	Yes
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	0
Small Entity::	0
Petition included?::	No
Secrecy Order in Parent Appl.?::	NO

DOCKETED
MAR 11 2004**Applicant Information:**

Applicant Authority type::	Inventor
Primary Citizenship Country::	US
Status::	Full capacity
Given Name::	Kyle
Middle Name::	Jay
Family Name::	Lively
City of Residence::	Tipton
State or Province of Residence::	IN
Country of Residence::	US

Street of mailing address:: 2894 E 400 S
City of mailing address:: Tipton
State or Province of mailing address:: IN
Postal or Zip Code of mailing address:: 46072

Applicant Information:

Applicant Authority type:: Inventor
Primary Citizenship Country:: US
Status:: Full capacity
Given Name:: Robert
Middle Name:: Lewis
Family Name:: Clarkson
City of Residence:: Tipton
State or Province of Residence:: IN
Country of Residence:: US
Street of mailing address:: 106 Plumlee
City of mailing address:: Tipton
State or Province of mailing address:: IN
Postal or Zip Code of mailing address:: 46072

Applicant Information:

Applicant Authority type:: Inventor
Primary Citizenship Country:: US
Status:: Full capacity
Given Name:: William
Middle Name:: Joseph
Family Name:: Laskar
City of Residence:: Tipton
State or Province of Residence:: IN
Country of Residence:: US
Street of mailing address:: 4081 S 125 W

City of mailing address:: Tipton
State or Province of mailing address:: IN
Postal or Zip Code of mailing address:: 46072

Applicant Information:

Applicant Authority type:: Inventor
Primary Citizenship Country:: US
Status:: Full capacity
Given Name:: Gregory
Middle Name:: Charles
Family Name:: Marshall
City of Residence:: Arcadia
State or Province of Residence:: IN
Country of Residence:: US
Street of mailing address:: 81 Point Lane
City of mailing address:: Arcadia
State or Province of mailing address:: IN
Postal or Zip Code of mailing address:: 46030

Correspondence Information

Correspondence Customer Number:: 27310

Representative Information

Representative Customer Number:: 27310

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::